COVID-19: The future of nursing will determine the fate of our health services

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Preparing the world to manage future pandemics must take priority. It is clear that we were not prepared for the COVID-19 pandemic which continues to cause great suffering around the world. Nurses and other health professionals everywhere must be involved in health policy planning and implementation of public health measures to combat this and future pandemics. Such preparation needs community policy involvement at grassroots levels and needs to be collaboratively instigated at international levels. The death so far of over 2000 nurses is unacceptable in this pandemic, and we need to better protect and sustain the workforce. The International Council of Nurses has been instrumental in data gathering of nurses' experiences during COVID-19. Key points from analysis of this data have been included in Second Progress Report of the World Health Organization's Independent Panel for Pandemic Preparedness and Response. This paper summarises the key messages from this report, as well as the nursing shortage. The International Council of Nurses resounds the call for massive investment in nursing education, leadership and jobs, as well as protection for our nurses on the frontlines of the pandemic.

Keywords: COVID-19, Health Policy, Nursing Education, Nursing Leadership, Nursing Shortage, Pandemic Preparedness, Pandemic Response, Pandemics

People think of history as being about the past, but the truth is, we are making it every day. Diarists write the first version, followed closely by journalists, but most diaries are kept private, and yesterday's newspapers are quickly consigned to the bin, usually the very next day.

I have no doubt that the COVID-19 pandemic and the world's response to it will be written about for decades, if not centuries to come. But how will history judge the world's response, and what lessons have we learned so far?

One of the first authoritative documents to examine how the world has dealt with the pandemic was published by the World Health Organization's (WHO) Independent Panel for Pandemic Preparedness and Response (IPPR).

The IPPR, which is co-chaired by the former President of Liberia, Her Excellency Ellen Johnson Sirleaf, and the former Prime Minister of New Zealand, The Right Honourable Helen Clark, was set up by WHO in July 2020 specifically to evaluate the world's response to the COVID-19 pandemic.



Its Second Progress Report, which was presented to the WHO Executive Board on 19 January 2021, begins with a stark message: 'The world was not prepared, and must do better' (IPPPR 2021).

In December 2020, the International Council of Nurses (ICN) hosted IPPR's first information gathering webinar. More than 250 individual nurses and representatives from ICN's National Nursing Associations tuned in, and a number presented their personal experiences of working on the front line of the pandemic. And I am pleased to say that many of the key points made in the webinar have made it into the IPPR report. The report also acknowledges that nurses have risen to the challenge, but often at a great personal cost. We know that the deaths of more than 2,000 nurses have been confirmed and that number is likely to be a gross underestimate of the true number of healthcare workers who will give their lives in the fight against this dreadful disease.

Key messages

In addition to the report's overarching theme that, despite plans being in place, the world really was not prepared for the pandemic, it has a number of key messages, each of which has implications for nursing.

Public health measures that would curb the pandemic need to be applied comprehensively

Clearly, nurses should be at the forefront of public health initiatives and they should be involved at all stages of policy development and implementation, as well as in clinical care.

The pandemic response has deepened inequalities

As in all disasters, it is the poorest societies and the poorest in those societies who suffer the most. Nurses can provide a universal level of care, and indeed, for many people, nurses are the only healthcare professionals they ever see throughout their lifetimes. The goal of healthcare for all will only be achieved if governments are serious about addressing the monumental global shortage of nurses.

The global pandemic alert system is not fit for purpose

Nurses are the health professionals who work most closely with patients and they are embedded in their communities. When patients are in hospital, nurses are at their bedsides 24 hours a day. They can be the eyes and ears of the public health system, alerting the world to emerging diseases with their expertise, their intimate knowledge of their communities and their observation skills.

There was a failure to take seriously the already known existential risks posed by pandemic threat

This century we have dealt with the Ebola, SARS and MERS pandemics, so the dangers of novel viruses are well known. But I believe the absence of nurses from the highest-level policymaking bodies could have thwarted many countries' efforts to react quickly and decisively in putting a brake on the virus at an early stage of the pandemic.

The World Health Organization has been underpowered to do the job expected of it

Of course, WHO needs more funds to fulfil its role, but it is only in recent years that it has had its own Chief Nursing Officer, and not all WHO regions have one. To harness the power of nursing, we need to see nurses in prominent positions taking decisions to maximise the efficiency and effectiveness of WHO and government health departments around the world.

The COVID-19 pandemic must be a catalyst for fundamental and systemic change in preparedness for future such events, from the local community right through to the highest international levels

I could not agree more: nurses are the professionals who can be the catalyst to make this happen on the front line: they can also the litmus test for how successful the necessary transformation will be. If we get the extra nurses we need, we will see massive increases in what can be achieved in terms of healthcare for all and improvements in our future biosecurity.

Tackling the nursing shortage

Nurses are not a panacea, but with a projected shortfall of at least ten million by 2030, their continued absence will be felt around the world, especially in low- and middle-income countries, where a lack of nursing care could be catastrophic.

The virus continues to sweep around the globe, evolving as it goes into variants that have different levels of transmissibility and virulence. Many healthcare systems are facing challenging times, and nurses on the front lines are exhausted. Many feel burned out. Many are considering leaving the profession once this crisis is over.

As the joint WHO/ICN/Nursing Now *State of the World's Nursing Report* says, we need a massive, long-term investment in nurse education, jobs and leadership (WHO 2020).

But what needs to be done now? Nurses need protection. They need proper breaks during their shifts and time off between shifts. They need proper personal protective equipment. They need access to education on infection control

procedures; they need support for the psychological strain they are under. They need to be rewarded properly for the crucial job they are doing in literally keeping their communities alive. They need governments to step up and put them where they deserve, not on a pedestal, but in a place where they can comfortably continue to do their priceless work without fear or personal risk.

And they need protecting from the virus. ICN has been calling on governments to ensure that nurses and other healthcare professionals are a priority group when it comes to vaccine roll outs. Protecting our nurses by vaccinating them as a matter of urgency is a sure-fire way of maximising the effectiveness and efficiency of our healthcare services.

It is clear that the vaccination process has got off to a slow and unequal start. But this process is important because it will be the first opportunity governments have to prove that, after the pandemic, they are serious about providing healthcare for all.

The poorest people in the world should not have to wait the longest to get their vaccines, and it is up to the world's governments, working in tandem with WHO, to put resources in place to ensure that the distribution of vaccines and the protection that they will afford are fair and equitable, so that all the peoples of the world can be freed from the terrible effects of this virus. The IPPR report reinforces ICN's call for a reset of our health systems, and the new nursing strategy coming out of the WHO, along with our International Nurses Day resources, provides the opportunity for us to pivot away from the past and towards a brighter future with nurses at the forefront of healthcare system change.

Politicians have not always made the best decisions during the pandemic, sometimes with disastrous results. Now is the time for them to redeem themselves, but the world is watching, and nurses are watching, and history will be the judge.

References

Independent Panel for Pandemic Preparedness and Response for the WHO Executive Board. (2021) Second Progress Report. 15 January. Available from: https://theindependentpanel.org/wp-content/uploads/ 2021/01/Independent-Panel_Second-Report-on-Progress_Final-15-Jan-2021.pdf Accessed 6 February 2021.

World Health Organization. (2020) State of the World's Nursing Report.
(A joint WHO/ICN, Nursing Now publication). WHO, Geneva. Available from: https://www.who.int/publications/i/item/9789240003279.
Accessed 6 February 2021.